# Traffic Signal Permit Form

## A. State Route Information
- **State Route**: [Enter State Route]
- **Milepost**: [Enter Milepost]
- **Control Section**: [Enter Control Section]
- **WSDOT Region**: [Enter WSDOT Region]

## B. Location Information
- **Location / Cross Street**: [Enter Location / Cross Street]
- **County**: [Enter County]
- **City**: [Enter City]
- **City Population**: [Enter City Population]

## C. Signal Type - Check Appropriate Boxes
- [ ] Conventional
- [ ] Intersection Control Beacon
- [ ] Ramp Meter
- [ ] Reverse Lane
- [ ] Emergency Vehicle
- [ ] Moveable Bridges
- [ ] Other

## D. Agency Information
- **Applicant Name**: [Enter Applicant Name]
- **Address**: [Enter Address]
- **City**: [Enter City]
- **State**: [Enter State]
- **Zip Code**: [Enter Zip Code]

## E. Warrant Check List
- [ ] Vehicular Volume Counts
- [ ] Intersection Sketch
- [ ] Projected Volumes
- [ ] Speed Study
- [ ] Pedestrian Volume Counts
- [ ] Warrant Analysis
- [ ] Gap Study
- [ ] Accident Study

## F. Hours Met
- [ ] Minimum Vehicular Volume
- [ ] Combination of Warrants
- [ ] Four Hour Volume
- [ ] Peak Hour Delay
- [ ] Non-MUTCD Warrant
- [ ] Other

## G. Support Data Checklist - Check appropriate boxes and describe the problem being addressed by this installation
- [ ] Vehicular Volume Counts
- [ ] Intersection Sketch
- [ ] Projected Volumes
- [ ] Speed Study
- [ ] Pedestrian Volume Counts
- [ ] Warrant Analysis
- [ ] Gap Study
- [ ] Accident Study

## H. Problem Statement
- [Enter Problem Statement]

## I. Regional Administrator Information
- **Regional Administrator Signature**: [Enter Signature]
- **Approval Date**: [Enter Date]

## J. Operating Agency Information
- **Turn-On Date**: [Enter Turn-On Date]
- **Agency Owning Signal**: [Enter Agency Owning Signal]
- **Agency Operating Signal**: [Enter Agency Operating Signal]
- **Control Type**: [Enter Control Type]
- **Agency Maintaining Signal**: [Enter Agency Maintaining Signal]
- **Agreement Number**: [Enter Agreement Number]

## K. Report of Change
- **Report of Change**: [Report Change in Type of Signal, Type of Control, or if signal was removed]
- **From**: [Enter From]
- **To**: [Enter To]
- **Date Changed**: [Enter Date Changed]

## L. Dot Form 342-014 EF
- [Enter Dot Form Information]
- [Enter Dot Form Information]
- [Enter Dot Form Information]